

Office of Manufactured Housing PO Box 42525 Olympia WA 98504-2525 360-725-2971 or 1-800-964-0852

REGISTRATION FOR MANUFACTURED HOME INSTALLER CONTINUING EDUCATION

Please print clearly or type

Mailing Address: ☐ Home ☐ Business	☐ Mrs.		Home	e Phone:
Elly State Zip Code Business Penne: (# applicable) Applicant is owner employee of this business. E-mail Address: WAINS #	-			, ,
Business Name: (#applicable) Applicant is owner employee of this business. E-mail Address: WAINS #	Address:			☐ Home ☐ Business
Applicant is owner employee of this business. E-mail Address:	City		State	Zip Code
WAINS #	Nama: (If applicable)			
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